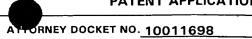
DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION



As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first

and joint inventor (if plant a patent is sought on the NON-POLARIZING SHL	he invent	tion entitled:	the subject matter	which is claimed and for which			
the specification of wh	ich is att	ached hereto unless th	e following box is	checked:			
	hich is attached hereto unless the following box is checked:as US Application No. or PCT International Application						
Number		and was amended on (if applicable).					
		reviewed and understood the contents of the above-identified specificat					
including the claims, a disclose all information	s amend	ed by any amendment	(s) referred to abou	ve. I acknowledge the duty to			
Foreign Application(s) and/or		•					
I hereby claim foreign priorit inventor(s) certificate listed I a filing date before that of th	pelow and	have also identified below ar	ny foreign application fo	any foreign application(s) for patent or r patent or inventor(s) certificate having			
COUNTRY	· ·	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119			
				YES: NO:			
				YES: NO:			
Provisional Application							
I hereby claim the benefit under Title 35, United States Code Section 119(e) of any United States provisional application(s) listed below:							
	,	APPLICATION NUMBER	FILING DATE				
insofar as the subject matte manner provided by the first	r of each o paragraph e 37, Code	of the claims of this applicat n of Title 35, United States e of Federal Regulations, Sec	ion is not disclosed in tl Code Section 112, I ack tion 1.56(a) which occu	States application(s) listed below and, ne prior United States application in the knowledge the duty to disclose material irred between the filing date of the prior			
APPLICATION NUMBER		FILING DATE STATUS (patented/pending/abandoned)					
. ,				,			

		-					
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith: Place Customer Place Customer Number Place Customer Number Bar Code Place Customer Place Customer Number Bar Code Place Customer Place Cust							
			Label here				
Send Correspondence to HEWLETT-PACKARD CO			Direct Telepho	one Calls To:			
Intellectual Property Adn			William J. Streeter				
P.O. Box 272400 Fort Collins, Colorado 80527-2400)	970/898-388	6			
made on information a with the knowledge imprisonment, or both	and belice that will , under §	ef are believed to be t ful false statements :	rue; and further the and the like so m I 8 of the United St	are true and that all statements at these statements were made ade are punishable by fine or ates Code and that such willful ent issued thereon.			
Full Name of Inventor: Heather Noel Bean			Citizenship: U	.S.			
Residence: 21	14 N. WI	nitcomb St.					
Post Office Address: Fort Collins, Colorado 80521							
Mit (1)			7/27/01				
Inventor's Signature			Date				

DECLARATION AND FOR OF ATTORNEY FOR PATENT APPLICATION (continued)



Full Name of # 2 joint inventor:	: Mark Nelson Robins		Citizenship: U.S.
Residence:	1425 13th Street		
Post Office Address:	Greeley, Colorado 80631		
humb Calson Robins	3	27 J.	یار قدد ا
Inventor's Signature		Date	3
		t	,
Full Name of # 3 joint inventor	:		Citizenship:
Residence:			
Post Office Address:		,	
Inventor's Signature		Date	
inventor a dignature		Date	
Full Name of # 4 joint inventor	r:		Citizenship:
Residence:			
Post Office Address:	-		7.0
Inventor's Signature		Date	
Full Name of # 5 joint inventor	r:		Citizenship:
Residence:			
Post Office Address:			
	•		
Inventor's Signature		Date	
1			
Full Name of # 6 joint invento	r:		Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature			
		Date	
			0
Full Name of # 7 joint invento	r:	·	Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	
Full Name of # 8 joint invento	or:		Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	